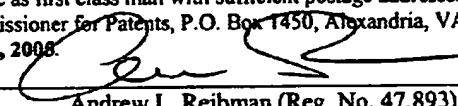




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U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE			
NOTICE OF APPEAL AND REQUEST FOR EXTENSION OF TIME PURSUANT TO 37 C.F.R. § 1.136(a)		Docket Number: 12406/29A	
Application Number 09/808,329	Filing Date March 14, 2001	Examiner Steven L. Ashburn	Art Unit 3714
Invention Title A UNIVERSAL LOTTERY GAME TICKET AND A LOTTERY GAME AND A METHOD OF PLAYING THE LOTTERY GAME USING THE TICKET		Inventor(s) Alan Taylor et al.	

Address to:
Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Certificate of Mailing or Transmission I hereby certify that this <u>Amendment, and Notice of Appeal (with Request for Extension of Time)</u> are being deposited with the United States Postal Service as first class mail with sufficient postage addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on May 2, 2004.  _____ Andrew L. Reibman (Reg. No. 47,893)
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1253
1020

SIR:

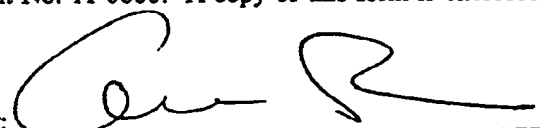
Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision of the Examiner made in the Final Office Action dated November 1, 2004.

Applicants also respectfully request a **three-month extension of time** in which to respond to the Final Office Action of November 1, 2004, for which a three month response period expiring on February 1, 2005 was set. The three-month extended period for response expires on May 2, 2004 (May 1, 2005 being a Sunday).

The Commissioner is hereby authorized to charge payment of the 37 C.F.R. § 1.191 Notice of Appeal fee of \$500.00 and the 37 C.F.R. § 1.136(a) three month extension fee of \$1,020.00 to the deposit account of **Kenyon & Kenyon**, deposit account number **11-0600**.

The Commissioner is also authorized to charge any additional fees or credit any overpayment in connection with this paper to Deposit Account No. 11-0600. A copy of this form is enclosed for charging purposes.

Dated: May 2, 2004

By: 

Andrew L. Reibman (Reg. No. 47,893)

KENYON & KENYON
One Broadway
New York, N.Y. 10004
(212) 425-7200 (telephone)
(212) 425-5288 (facsimile)

Customer Number 26646

5/06/2005 MAILP1 00000017 110600 09808329

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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09/808329
55,085-CIP (18102)

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	33	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	33 minus 20 =	13
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	52	33	=
Independent	5	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

Best Available Copy

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	52	52	=
Independent	5	5	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	52		=
Independent	5		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	FEE
BASIC FEE	710.00
X\$18=	234.00
X80=	
+270=	
TOTAL	944.00

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

09/808329

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	33	NUMBER FILED
TOTAL CHARGEABLE CLAIMS	73 minus 20 =	13
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	234.00
X84=	
+280=	
TOTAL	974

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT			
HIGHEST NUMBER PREVIOUSLY PAID FOR			
PRESENT EXTRA			
Total	52	Minus	** 52 =
Independent	5	Minus	*** 5 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT			
HIGHEST NUMBER PREVIOUSLY PAID FOR			
PRESENT EXTRA			
Total	52	Minus	** 52 =
Independent	5	Minus	*** 5 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT			
HIGHEST NUMBER PREVIOUSLY PAID FOR			
PRESENT EXTRA			
Total		Minus	** =
Independent		Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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